

State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

05/16/2019

Document Number:

402047022

Off-Location Flowline

The Flowline Report, Form 44, shall be submitted to register, report realignment, report removal from service, or report abandonment of Off-Location Flowlines, Produced Water Transfer Systems, Domestic Taps, or Crude Oil Transfer Lines as required by the 1100 Series Rules. The Form shall also be submitted to report Grade 1 Gas Leaks from Flowlines per Rule 1104.k.

Operator Information

OGCC Operator Number: 10575 Contact Person: Jeff Rickard
Company Name: 8 NORTH LLC Phone: (720) 737-5144
Address: 370 17TH STREET SUITE 5300 Email: Jrickard@extractionog.com
City: DENVER State: CO Zip: 80202
Is the Operator a Tier One member of the Utility Notification Center of Colorado (UNCC) that participates in Colorado's One Call notification system? Yes ☒ No ☐

OFF LOCATION FLOWLINE**FLOWLINE ENDPOINT LOCATION IDENTIFICATION**

Location ID: 424783 Location Type: Production Facilities
Name: Lyn USX Number: MC05-62HN Tank
County: BOULDER
Qtr Qtr: NWSE Section: 5 Township: 1N Range: 69W Meridian: 6
Latitude: 40.079910 Longitude: -105.140450

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465303 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 40.079928 Longitude: -105.140299 PDOP: 0.9 Measurement Date: 04/05/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321473 Location Type: Well Site ☐ No Location ID
Name: LYN USX MC-61N69W Number: 5NESE
County: BOULDER
Qtr Qtr: NESE Section: 5 Township: 1N Range: 69W Meridian: 6
Latitude: 40.076399 Longitude: -105.136005

Flowline Start Point Riser

Latitude: 40.076392 Longitude: -105.136021 PDOP: 1.0 Measurement Date: 04/06/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 05/05/2008
Maximum Anticipated Operating Pressure (PSI): 584 Testing PSI: 1000
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465304 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 40.079930 Longitude: -105.140299 PDOP: 0.9 Measurement Date: 04/06/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321492 Location Type: Well Site ☐ No Location ID
Name: LYN USX MC-61N69W Number: 5SWNW
County: BOULDER
Qtr Qtr: SWNW Section: 5 Township: 1N Range: 69W Meridian: 6
Latitude: 40.081850 Longitude: -105.147890

Flowline Start Point Riser

Latitude: 40.081862 Longitude: -105.147901 PDOP: 0.9 Measurement Date: 04/01/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.750
Bedding Material: Native Materials Date Construction Completed: 09/30/2009
Maximum Anticipated Operating Pressure (PSI): 710 Testing PSI: 1000
Test Date: 03/15/2018

OPERATOR COMMENTS AND SUBMITTAL

Comments

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
Signed: _____ Date: 05/16/2019 Email: Emartinez@h2eincorporated.com

Print Name: Emily Martinez Title: Environmental Scientist

Based on the information provided herein, this Flowline Report complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved:  Director of COGCC Date: 6/12/2019

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
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402047022	Form44 Submitted
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402047037	PRESSURE TEST
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402047038	PRESSURE TEST
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Total Attach: 3 Files